So You're Conducting Outreach...

Setting

the

Stage...



Carla is talking to **John**, a trainer for the Centers for Medicare & Medicaid Services (CMS), who is helping her understand the program.

Carla is a member of a community-level organization and has been asked to help the people in her church understand the new Medicare prescription drug coverage. She has been helping people in her community for many years, but hasn't helped them with Medicare.



The Facts...

Main points appear in captions like this one on the left side of each page

The Dialogue...

The conversation between Carla and John appears in quotes on the right side of each page in captions like this one.

Medicare Overview



Medicare is a health insurance program for

- People 65 years and older
- People under age 65 with certain disabilities
- People of all ages with End-Stage Renal Disease (permanent kidney failure requiring dialysis or a kidney transplant)

"Hi, John! As you know, I've been asked to help people in my church on the new Medicare prescription drug coverage, but I'm not even sure what Medicare is."



"Hi, Carla. I'll be happy to explain the program and answer your questions. Medicare is a health insurance program for people who are 65 years and older, people under age 65 with certain disabilities, and people of all ages with End-Stage Renal Disease or ESRD. ESRD is permanent kidney failure requiring dialysis or a kidney transplant."

Medicare Prescription Drug Coverage



"OK. I've heard my grandmother talk about Medicare. But I haven't heard her talk about Medicare prescription drug coverage."

Medicare will offer prescription drug coverage beginning January 1, 2006



"That's because it's new. Beginning January 1, 2006, Medicare prescription drug coverage will be available to all people with Medicare.

Most people will be able to get this coverage through Medicare prescription drug plans. Medicare will also work with employers and unions to ensure that people who currently receive drug coverage through their former employer or union can continue to do so."



"You know, John, my grandmother will want to know why she should make any changes to her current Medicare coverage. Why would she want to get prescription drug coverage?"

Medicare prescription drug coverage is important. It protects from high out-ofpocket costs



"Excellent question, Carla.

Medical practice has come to rely more and more on new drug therapies to treat chronic conditions, and out-of-pocket spending on drugs has increased dramatically in recent years.

Most people with Medicare currently need or will come to need prescription drugs to stay healthy. Medicare prescription drug coverage will protect them from high out-of-pocket costs."



"Can anyone with Medicare get this drug coverage?

Are people with Medicare automatically enrolled in a Medicare prescription drug plan?"

Medicare prescription drug coverage is available to everyone who has Medicare Part A or Part B



"The answer to your first question is, yes.

Medicare prescription drug

coverage is available to those who have either Medicare Part A or Medicare Part B. Medicare Part A is hospital insurance and Medicare Part B is medical insurance. There will be at least two Medicare prescription drug plans to choose from.

But people with Medicare are not automatically enrolled.

Most people will need to choose and enroll in a Medicare prescription drug plan to get prescription drug coverage.

They will need to decide how



they want to get their prescription coverage. They can get their coverage in several ways."

People with Medicare will need to decide how they want to get their prescription drug coverage

Information about plans will be available October 2005

They can first enroll from November 15, 2005, through May 15, 2006

People with Medicare can get all their health-care benefits and prescriptions through a Medicare Health Plan (Medicare Advantage and Medicare Cost Plans).



They can also get their health care benefits through the Original Medicare Plan, or a Private Fee-for-Service Plan and choose a Medicare prescription drug plan.

People with Medicare can get information about prescription drug health plans starting in October, and can enroll in a plan from November 15, 2005, through May 15, 2006."

"What's the difference between the Original Medicare Plan, Private Fee-for-Service Plans, and a Medicare Health Plan?"



"The Original Medicare Plan and Private Fee-for-Service plans are pay-per-service health plans. In a Medicare Health Plan, typically you have to go to doctors and hospitals that participate with that plan – often called the plan's network."



"Medicare Health Plans sound similar to the HMO that I have through my work. I get both health services and drug coverage through my HMO."

"Medicare prescription drug coverage sounds like it could be beneficial to help pay for prescription drugs. But how much will it cost?"

Costs for a plan with standard Medicare prescription drug coverage might look like this:

- around \$37 monthly premium
- \$250 deductible
- 25% coinsurance up to \$2,250
- 100% until \$3,600 out-of pocket
- 5% coinsurance after \$3,600 out-of-pocket

"There will be different types of plans. An example of a plan with standard coverage might look like this:



A person who enrolls in a Medicare Prescription Drug Plan will pay a monthly premium, around \$37 in 2006, and a yearly

deductible (\$250 in 2006).

After he or she pays the deductible, Medicare will pay 75% of the person's drug costs and the person with Medicare will pay 25% coinsurance. This is up to \$2,250 in drug costs.

Then the person with Medicare is responsible for paying 100% of the next \$2,850 drug costs until his or her out-of-pockets costs reach \$3,600.

After that, Medicare pays 95%, and the person pays 5% of his or her drug costs for that year.

There will be extra help with paying these costs for some people with limited income and resources.

Out-of-pocket expenses include the deductible and coinsurance — does not include the premium



"I think that helps. You mention 'out-ofpocket expenses.' Can you tell me what expenses are considered 'out-of-pocket expenses'?"

"Out-of-pocket expenses include expenses that a person with Medicare pays for his or her drug costs. These include the deductible and coinsurance. The premium is not considered an out-of-pocket expense."

- Plans cover brand-name and generic drugs
- Covered Medicare prescription drugs may be different with different plans

"What drugs are covered by the Medicare prescription drug plans? Are all prescription drugs covered?"

"That's a good question. Many prescription drugs including brand-name and generic drugs are covered. Medicare will contract with private companies to offer this drug coverage. The companies will offer a variety of options with different covered prescriptions and different costs.

It's important for the person with Medicare to choose a plan offering coverage that meets his or her needs."



If the person with Medicare has limited income and resources, he or she could qualify for extra help

"Tell me more about the help for people with lower incomes."



For people with limited income and resources, there is extra help paying for deductibles, premiums, and coinsurance



"If the person with Medicare has limited income and resources, there is extra help with prescription drug plan costs.

The amount of help depends on the person's income and resources.

The extra help can pay for the Medicare prescription drug coverage deductible, premiums, and coinsurance. And keep in mind, people who are eligible for the extra help may have little or no out-of-pocket costs."

"Some people with Medicare will be automatically eligible for the extra help.



Some people will be automatically eligible for the extra help

People who automatically qualify include those who have both Medicare and Medicaid. Medicaid is a health insurance program for people with limited income and resources.

People with Medicare who receive Supplemental Security Income (SSI) are also automatically eligible for the extra help.

People with Medicare who get help from Medicaid paying their Medicare premiums are also automatically qualified.

All other people with Medicare who think they might be eligible must apply for the extra help."



"Will people who are cosidered automatically eligible need to apply for the extra help?"

"No, these individuals do not have to apply for the extra help. They will automatically get it."

"Sounds like this could be a great program for people who need it. How do people who are not automatically eligible apply for the extra help?"

Many people will receive an application for the extra help from the Social Security Administration this summer



"Many people will get an application in the mail from the Social Security Administration this summer. People who don't get one can call 1-800-772-1213 or their local Social Security



office for an application. Or they can get an application on the internet at www.socialsecurity.gov or www.medicare.gov starting July 2005.

People can go to a local Social Security office for help filling out the application, which will ask for information on their income and resources.

They can also contact their State Health Insurance Assistance Program (SHIP) or Area Agency on Aging for assistance in applying for the extra help.



"What if the person with Medicare already has drug coverage through a retirement plan or some other plan?"

If a person with Medicare already has drug coverage from another source, he or she needs to decide whether to continue the current coverage or change to a Medicare prescription drug plan

"Well, that could be a good thing. The person needs to know some information to make a good decision regarding whether or not to get Medicare prescription drug coverage.

People with Medicare who currently have prescription drug coverage will be notified by their current insurance plan if their current drug coverage is at least as good as Medicare prescription drug coverage

First, the person with Medicare needs to know if the current drug coverage is at least as good as what is being offered by Medicare prescription drug plans.

People will find out from their plan if their coverage is at least as good as Medicare's, or they can contact their plan to get this information."

"What happens if the coverage isn't as good as the Medicare coverage?"



If the drug coverage the person with Medicare currently has supplements Medicare prescription drug coverage, then he or she may want to enroll in a Medicare prescription drug plan



"If the drug coverage the person with Medicare currently has is not as good as a Medicare prescription drug plan, then the person with Medicare needs to know if it supplements the Medicare prescription drug coverage. If it does, then he or she may want to enroll in a Medicare prescription drug plan.

It is important for people with Medicare to understand if their current coverage is at least as good as Medicare prescription drug coverage so they can make an informed decision.

This is important because people with Medicare may have to pay a higher premium if they wait to enroll in a Medicare prescription drug plan. The higher premium is at least 1% more for every month they waited to get Medicare prescription drug coverage."



"What are the circumstances when people with Medicare will have to pay a higher premium? I think understanding this is important."

If current coverage is not as good as Medicare prescription drug coverage, and the person with Medicare doesn't enroll in a Medicare prescription drug plan, he or she could face a higher premium later "You're right, Carla. It is important.



People with Medicare will pay a higher premium if their current coverage is not as good as what Medicare is offering, and they don't enroll in a Medicare plan when first eligible.

They will also pay a higher premium if they don't currently have any prescription drug coverage and don't enroll in a Medicare prescription drug plan when first eligible.



"What happens if the person has a plan that is at least as good as what Medicare is offering and wants to enroll in a Medicare plan later?"

"That's a good question, Carla. As long as the current plan is at least as good as what is offered by a Medicare plan, he or she will not have to pay a higher premium to join a Medicare plan later. He or she should contact the benefits administrator for his or her plan."

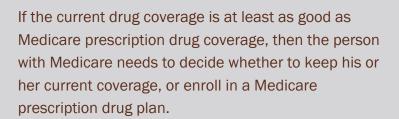


"This sounds like a lot of information. Could you review it with me one more time?"

If current drug coverage

- is at least as good as Medicare prescription drug coverage, then decide whether to keep current coverage or enroll in Medicare plan
- is not as good as
 Medicare coverage
 or have no drug
 coverage, then need to
 enroll in a Medicare plan
 when first eligible, or pay
 a higher premium to
 enroll later
- supplements Medicare prescription drug coverage, then enroll in a Medicare plan for complete coverage at the lowest premium





If the current coverage is not as good as Medicare coverage, or if he or she doesn't have drug coverage at all, then he or she will need to enroll in a Medicare plan when first eligible, or pay a higher premium if enrolling later.

If the current drug coverage supplements Medicare prescription drug coverage, then the person needs to enroll in a Medicare prescription drug plan to pay the lowest possible premium. Does this help?"

"It sure does. John!"



"That is important information to know. It sounds like people with Medicare will need to make an important decision because it could save



Deciding whether or not to enroll in a Medicare prescription drug plan is an important decision them money. And some people with Medicare are already on a limited income."



"That's right,
Carla. It is an
important
decision.
People who
already have
Medicare will

need to decide whether or not to enroll in a Medicare prescription drug plan between November 15, 2005, and May 15, 2006. If they enroll by December 31, 2005, coverage will begin January 1, 2006.

This is called the Initial Enrollment Period for Medicare prescription drug coverage. If people don't enroll in a plan during this time period, they can enroll during the General Enrollment Period, which is November 15 through December 31 of each year beginning in 2006."

To summarize:

- Starting January 1, 2006, Medicare prescription drug coverage will help people with Medicare pay for the prescriptions they need
- Medicare prescription drug coverage is available to all people with Medicare
- There is additional help for those who need it most
- The Medicare prescription drug coverage pays for brand-name and generic drugs
- People with Medicare can choose between at least two Medicare prescription drug plans and pick a plan that is right for them



"Well, John, I think I know enough to help people with the new Medicare prescription drug coverage. Here are the main points that I remember:

Starting January 1, 2006, Medicare prescription drug coverage will help people with Medicare pay for the prescriptions they need.

Medicare prescription drug coverage is available to all people with Medicare.

There is additional help for those who need it most.

The Medicare prescription drug coverage pays for brand-name and generic drugs.

People with Medicare can choose between at least two Medicare prescription drug plans and pick a plan that is right for them."



"That's great!
You've picked up the most important points.
Keep in mind that people with Medicare will be getting more

information in the mail throughout 2005. Also, be sure to visit www.medicare.gov or call 1-800-MEDICARE (1-800-633-4227) if you need more information on the Medicare prescription drug coverage."